

8/20/2020

Division of Corporations

P20000064055

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : I20180000033
Phone : (305)805-3516
Fax Number : (305)887-5844

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: KUNYSOSA@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION**THE G FAMILY COMPANY CORP**

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: THE G FAMILY COMPANY CORP
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: FIRST NAME - ADRIAN
(2) LAST NAMES - SOSA GONZALEZ
Name (Printed or typed)

4869 NE 122ND DR

Address

OKEECHOBEE, FLORIDA 34972

City, State & Zip

561-420-2088

Daytime Telephone number

KUNYSOSA@GMAIL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

2020 AUG 20 PM 3:58
TALLAHASSEE, FL 32314

2020 AUG 20 PM 3:58

FILED

FILED

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2020 AUG 20 PM 3:58

ARTICLE I NAME

The name of the corporation shall be: THE G FAMILY COMPANY CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4869 NE 122ND DR

4869 NE 122ND DR

OKEECHOBEE, FL 34972

OKEECHOBEE, FL 34972

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ADRIAN SOSA GONZALEZ, PRES. Name and Title: _____

Address 4869 NE 122ND DR Address: _____

OKEECHOBEE, FL 34972 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name:

Adrian Sosa Gonzalez

Address:

4869 NE 122nd DR
Okeechobee, FL 34972**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name:

Adrian Sosa Gonzalez

Address:

4869 NE 122nd Dr
Okeechobee, FL 34972**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 8-18-2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*x [Signature]

Required Signature/Registered Agent

8-18-2020

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*x [Signature]

Required Signature/Incorporator

8-18-2020

Date